DECLARATION FOR U.S. PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

MEDICAL MATERIAL AND PROCESS FOR PRODUCING THE SAME

the specification	of which is attached hereto ur	less the following is che	ecked	
was filed on PCT Internation	as United State al Application Number PCT/J	es Application Number _ P2005/01410 and was a	and was filed on mended on	01.February.2005as (if applicable).
I hereby state th	at I have reviewed and understanded by any amendment referr	and the contents of the a		
	he duty to disclose information		tentability as defined in Title	37, Code of Federal
I hereby claim for patent or invinventor's certification.	oreign priority benefits under T entor's certificate listed below icate having a filing date before	Title 35, United States Coand have also identified that of the application	ode, § 119 (a) – (d) of any for below any foreign application for which priority is claimed.	reign application(s) on for patent or
(List prior foreign				Priority Claimed
applications. See note A)	2004-28581	Japan	04/February/2004	⊠ Yes □ No
note A)	(Number)	(Country)	(Day/Month/Year Filed)	
				☐ Yes ☐ No
	(Number)	(Country)	(Day/Month/Year Filed)	
				☐ Yes ☐ No
	(Number)	(Country)	(Day/Month/Year Filed)	
	(Number)	(Country)		☐ Yes ☐ No
(See note B)	,	(Country)	(Day/Month/Year Filed)	
	See attached list for additional			
in the manner printformation which	he benefit under Title 35, Uniter bject matter of each of the clair covided by the first paragraph of the material to patentability as came available between the filitication.	ns of this application is of Title 35, United State is defined in Title 37. Co	not disclosed in the prior Units Code, § 112, I acknowledged to the control of th	ted States application the duty to disclose
			Stat	us
(List prior U.S. Applications)				
	(Application Serial No.)	(Filing Date)	Patented Pend	ling
	(1 ipplication Schall 140.)	(I fing Date)		
			☐ Patented ☐ Pend	ling Abandoned
	(Application Serial No.)	(Filing Date)		
	(Application Serial No.)	(Filing Date)	Patented Pend	ing ∐ Abandoned
	(pp	(1 ming Date)		
_			☐ Patented ☐ Pend	ling
	(Application Serial No.)	(Filing Date)		_

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number: 38834

Please direct all communications to the following address:

Westerman, Hattori, Daniels & Adrian, LLP
1250 Connecticut Avenue, N.W., Suite 700, Washington, D.C. 20036

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18 of the United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

(See note C)	Full name of sole or	first inventor (given name, family name)	Tetsushi TAGUCHI			
	Inventor's signature	Jelsushi Janchi	Date 1/4/9 2006			
	Residence Post Office Address	Ibaraki, JAPAN	Citizenship JAPAN			
		c/o National Institute For Materials Sci				
	2-1, Sengen 1-chome, Tsukuba-shi, Ibaraki 305-0047 Japan					
	Full name of second	inventor (given name, family name).	Hisatoshi KOBAYASHI			
	Inventor's signature Residence Post Office Address	24 Godosh Columnas N	Date July 19, 2006			
		Ibaraki, JAPAN	Citizenship JAPAN			
		c/o National Institute For Materials Science	ence,			
		2-1, Sengen 1-chome, Tsukuba-shi, Ibaraki 305-0047 Japan				
	Full name of third in	ventor (given name, family name)	Junzo TANAKA Date Tuly 2 2006 Citizenship JAPAN			
	Inventor's signature Residence Post Office Address	Jungo Tonder.				
		Ibaraki, JAPAN				
		c/o National Institute For Materials Science,				
		2-1, Sengen 1-chome, Tsukuba-shi, Ibaraki 305-0047 Japan				
	Full name of fourth in Inventor's signature Residence Post Office Address	nventor (given name, family name)	Kazuo TSUBOTA			
		Kagno Soloti	Date Hug 3/, 2006			
		Chiba, JAPAN	Citizenship JAPAN			
		c/o Tokyo Dental College Ichikawa General Hospital, 11-13, Sugano 5-chome,				
	Ichikawa-shi, Chiba 2720824 Japan					
	Full name of fifth inventor's signature Residence Post Office Address	entor (given name, family name)	Naoshi SHINOZAKI			
		Nove de 15	Date An 28, 2008			
		Chiba, JAPAN	Citizenship			
		c/o Tokyo Dental College Ichikawa General Hospital, 11-13, Sugano 5-chome,				
	Evil name of single	Ichikawa-shi, Chiba 2720824 Japan				
	Inventor's signature Residence Post Office Address	entor (given)name, family name)	Date Shigeto SHIMMURA			
		Chiho IADAN	Citizenship 50 100			
		Chiba, JAPAN				
		c/o Tokyo Dental College Ichikawa General Hospital, 11-13, Sugano 5-chome,				
	Full name of eighth in	Ichikawa-shi, Chiba 2720824 Japan ventor (given name, family name)	TTI D.			
	Inventor's signature Residence Post Office Address	Hodeyaki Miyaebita Chiba, JAPAN	Date Aug 20 2 - 4			
			Citizenchin / 19 . 20 . 2000.			
		c/o Tokyo Dental College Ichikawa General Hospital, 11-13, Sugano 5-chome,				
		Ichikawa-shi, Chiba 2720824 Japan	ciai mospitai, 11-13, Sugano 5-cnome,			
		Jan, Chiba 2/20024 Japan				

NOTES

- A. Please list all foreign applications relating to the invention and check block "yes" or "no".
- B. If more than 4 prior foreign applications, please check this box and attach a sheet listing the remaining prior foreign applications.
- C. For residence in the U.S., indicate <u>city and state</u>, for residence outside the U.S., indicate <u>city and country</u>. The "Post Office Address" must be an address acceptable by a Post Office for delivery of mail.